



PERSONAL CARE ASSISTANT SERVICES


Medicaid School Services

Provider Training 2020-2021


Purpose

- Common Acronyms
- Provider Participation Requirements
- Covered Services
- Billing Instructions
- Documentation Requirements
- Supervision
- Medical Evaluations



Commonly Used Acronyms

- VDOE - Virginia Department of Education
- DMAS - Department of Medical Assistance Services
- CMS - Centers for Medicare & Medicaid Services



Commonly Used Acronyms – Cont'd

- EPSDT - Early & Periodic Screening, Diagnosis, and Treatment
- CHIP - Federal Child Health Insurance Program
- FAMIS - Family Access to Medical Insurance Security Program - Virginia's CHIP program
- FAMIS Plus - Children's Medicaid in Virginia



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Commonly Used Acronyms – Cont'd

- IEP - Individualized Educational Program
- LEA - Local Education Agency
- POC - Plan of Treatment / Plan of Care
- PCP - Primary Care Physician
- PCA - Personal Care Assistant
- QMR - Quality Management Review
- ORP – Ordering, Referring, Prescribing



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PROVIDER REQUIREMENTS

Provider Requirements

LEA Provider Manual, Ch. II – Provider Participation


- The DMAS LEA Provider Manual may be found on the DMAS website at:
<https://www.virginiamedicaid.dmas.virginia.gov/wps/portal>





Provider Requirements

LEA Provider Manual, Ch. II – Provider Participation

- Personal Care Assistants must be supervised by a DMAS-qualified provider (RN, OT, PT, SLP, Psychiatrist, Psychologist, Social Worker).
- The supervising provider must be licensed in Virginia.
- Personal Care Assistant cannot be the parent, step-parent or legal guardian of the student.



COVERED SERVICES

Services

LEA Provider Manual, Ch. IV – Covered Services

The work of the personal care assistant is distinguished from the:

- Occupational Therapy Assistant
- Physical Therapy Assistant
- Speech Language Pathology Assistant
- Etc.

The personal care assistant provides non-therapeutic support to the work of the licensed professional.

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Services

LEA Provider Manual, Ch. IV – Covered Services

Personal care assistance services are *non-therapeutic activities* that support:

- Nursing
- Occupational Therapy
- Physical Therapy
- Speech Language Pathology
- Audiology
- Behavioral health care

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Services

LEA Provider Manual, Ch. IV – Covered Services


- Services must be documented in the IEP
- A plan of care must be developed by the licensed provider within their license scope
 - A separate plan of care must be developed if services are being supervised by different disciplines (e.g., nursing versus SLP)
- The supervising provider's signature is required on the Plan of Care.

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Services

LEA Provider Manual, Ch. IV – Covered Services

- Services include, but are not limited to:
 - Assistance with ADLs
 - Assistance with meal preparation
 - Medically necessary supervision related to a health condition
 - Maintenance level services (positioning, transfers, correct application of splints, etc.)
 - Assistance/support to increase adaptive behavioral functioning (to support behavior modification plan developed by a licensed provider)
 - Assistance for transportation to and from the school or provider




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Nursing PCA Services

DOE, VDH Guidelines

- Must meet minimum qualifications for unlicensed assistive personnel as required by
 - Department of Education
 - Virginia School Health Guidelines
 - See *Unlicensed Assistive Personnel*
 - Virginia Department of Health




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Nursing PCAs

DOE, VDH Guidelines

- Must receive training for assisting with meeting the specific health needs of the student as outlined in the following:
 - Virginia School Health Guidelines Manual;
 - Specialized Health Care Procedures Manual;
 - Manual for the Training of Public School Employees in the administration of Medication; and
 - Manual for training of Public School Employees in the Administration of Insulin and Glucagon.



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Mental Health Services PCAs

- When a student has a current Individualized Educational Program (IEP) plan including significant behavioral issues, the IEP committee decides upon appropriate educational placement.
- Students can be placed in an Applied Behavioral Analysis (ABA) classroom because of significant behavioral concerns that can no longer be appropriately addressed in a regular or a typical special educational setting.



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Mental Health Services PCAs – Cont'd

- A licensed mental health provider must approve the Plan of Care as required by DMAS. (See DMAS-46)
- The goals and objectives are written for one year.
- The procedures should be expressed in "behavioral terms" as part of the IEP.



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BILLING INSTRUCTIONS

Billing Instructions

LEA Provider Manual, Ch. V – Billing Instructions

- A unit of services equals 15 minutes, for no more than 8.5 hours a day, or 34 units per day.
- The number of units billed is not to exceed the number of units in a day that the student is in the care of the school.

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Billing Instructions

LEA Provider Manual, Ch. V – Billing Instructions

- While more than one assistant may attend to the student during a school day, the unit for a particular period of the day shall not be billed for the services of more than one assistant.

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Billing Instructions

LEA Provider Manual, Ch. V – Billing Instructions


- *To calculate the number of units to bill, add up all of the service minutes in a month and divide that number into 15 minute units.*

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Billing Instructions

LEA Provider Manual, Ch. V – Billing Instructions

- If the service being billed requires an order or other form of provider referral or authorization under state law, then the NPI of a DMAS-qualified provider who is qualified to authorize that type of service must be included on the claim.



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DOCUMENTATION REQUIREMENTS

Documentation Requirements

LEA Provider Manual, Ch. VI – Utilization Review & Control

- Documentation must be in accordance with requirements of individual licensing board within DHP, VDOE, and DMAS.
- Quality Management Reviews (QMRs) follow requirements noted in Chapter VI of the DMAS LEA Provider Manual.




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Documentation Requirements

LEA Provider Manual, Ch. VI –
Utilization Review & Control

- Records must be made available to authorized state and federal personnel and include the current IEP pages that document actual services




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Documentation Requirements

LEA Provider Manual, Ch. VI –
Utilization Review & Control


- DMAS forms are recommended and available online through the Virginia Medicaid Portal
- The Portal is easily accessed through DMAS website at <http://www.dmas.virginia.gov>
- Forms may be completed electronically and printed out to place in record.



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Documentation Requirements





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PCA Plan of Care

LEA Provider Manual, Ch. VI
Utilization Review & Control

- IEP may serve as POC only if it includes all elements of the POC.
- The POC developed by the qualified provider should be consistent with the health conditions and functional limitations documented in the IEP.

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DMAS

PCA Plan of Care

LEA Provider Manual, Ch. VI
Utilization Review & Control

- Medical condition and diagnosis/identifying issue being addressed.
- ICD-10 Code.
 - Specific to needs identified in assessment.
- Goals and objectives.
- Treatment intervention and which goal(s) addressed.

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DMAS

PCA Plan of Care

LEA Provider Manual, Ch. VI
Utilization Review & Control


- Approximate amount of time for each service.
- Signed and dated by the licensed provider that is supervising the POC.
- Plan of Care is good for up to one year.

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DMAS

PCA Service Log – DMAS 37


- Progress Notes/Student Log
 - DMAS qualified provider must sign and date each form.
 - Individual activity entries must be initialed and dated by responsible assistant/provider of service each day service is provided.
 - Providers requiring supervision require documentation of supervision per requirements of licensing board, VDOE and DMAS.




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PCA Service Log

- The personal care assistant shall document:
 - On a daily basis for non-nursing services
 - For nursing services, the documentation is per occurrence
 - Date, amount of time, and type of contact
 - Activity
 - Student Response
 - N = Normal
 - V = Variance from normal or standard. If variance, include written explanation in "Comment" section.



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SUPERVISION

Supervision

- The supervising provider must meet DMAS provider qualifications for school services as spelled out in Ch. II of the LEA Provider Manual.
- The supervising provider must be licensed to practice under Virginia law.

DMAS

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Supervision

- A supervisory visit must be conducted at least every 90 (ninety) days to ensure both quality and appropriateness of services.
- Must also follow licensing regulations for the appropriate profession (e.g., face-to-face supervision requirements).
- Review the child's progress and make any adjustment to goals or treatment modalities.

DMAS



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Supervision

- Condition of the child, as well as qualified provider's license requirements, determines the frequency of supervision visits and whether the supervision is direct versus indirect.
- A visit must be conducted at least every 90 (ninety) calendar days or according to your license requirements.
- Supervisor shall identify any gaps in aide's ability to function competently and shall provide training as indicated.

DMAS

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SCHOOL HEALTH MEDICAL EVALUATIONS

Medical Evaluations

LEA Provider Manual, Ch. IV - Covered Services


- Medical Evaluations include services to identify:
 - If the child's IEP is appropriate to meet the health needs of the child; or
 - If there are medical services required for the student to receive a free and appropriate education.



Medical Evaluations

LEA Provider Manual, Ch. IV - Covered Services

- Medical evaluation services are covered as physicians' services.
- Persons performing these services must be licensed practitioners (physicians, physician assistants, and nurse practitioners) acting within the scope of their practice.




Medical Evaluation Services

LEA Provider Manual, Ch. IV - Covered Services

Include (but not limited to):


- Identifying the nature or extent of a recipient's medical or other health related condition (may be face-to-face, chart review or telephonic consultation;
- Review of a recipient's initial IEP, as necessary, to determine the medical necessity for the medical/mental health related services designated by the IEP team;



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Medical Evaluation Criteria


- Annual review of a recipient's IEP as necessary to determine continuing medical necessity for the medical/mental health related services designated by the IEP team;
- Review of additional documents related to recipient's medical/mental health status either for consultative purposes or to determine medical necessity for services;



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Medical Evaluation Criteria

- Participating in meetings with IEP providers or families to provide medical input concerning a recipient's disability and medical/mental health-related services needed;



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Medical Evaluation Criteria

- Coordinating medical/mental health related services rendered outside the school setting. For example, talking to a recipient's primary care physician about medication needs; and
- Completion of referral reports and documentation relative to the IEP.

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Medical Evaluation Billing

LEA Provider Manual, Ch. V - Billing Instructions

- Code: T1024
- Maximum Interim Rate: \$96.51
- Unit: Per encounter

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Medical Evaluation Documentation Requirements

LEA Provider Manual, Ch. VI - Utilization Review & Control

- Positive and negative examination findings;
- Diagnostic tests ordered and the results of the tests;
- Diagnoses;
- An indication of whether further treatment is needed;
- Referrals, including the name of the referring physician; and
- Any recommended IEP changes.


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Resources

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